



## Application Data Sheet

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	<u>BLOOD VESSEL CLOSURE CLIP AND</u> <u>DELIVERY DEVICE</u>
Attorney Docket Number::	022762-0014
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Ireland
Status::	<input checked="" type="checkbox"/> Full Capacity
Given Name::	Christy
Family Name::	Cummins
City of Residence::	Naas
Country of Residence::	Co. Kildare
Street of mailing address::	9 Furnress Manor, Johnstown
City of mailing address::	Naas, Co. Kildare
Country of mailing address::	Ireland

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Ireland

Status:: Full Capacity  
Given Name:: Robert  
Family Name:: Stevenson  
Country of Residence:: Co. Kildare

**Correspondence Information**

Correspondence Customer Number:: 021125

**Representative Information**

Representative Customer Number:: 021125

**Domestic Priority Information**

**Foreign Priority Information**

**Assignee Information**

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